

AHCCCS BEHAVIORAL HEALTH SERVICES GUIDE

Inpatient Hospital Services

Provider Types:

- General acute care hospital or a distinct unit of a general acute care hospital (provider type 02)
- A mental hospital (provider type 71), an IMD (see IMD Fact Sheet)

Description of Service:

Inpatient hospital services include all behavioral health services, medical detoxification, accommodations and staffing, supplies and equipment to treat episodes of mental illness or substance abuse disorders. Services must be provided under the direction of a physician.

Service Limitations:

- 1. There are no specific inpatient hospital limitations for Title XIX/XXI members in a **general acute care hospital** (GACH) or a distinct psychiatric unit of a GACH. The 4-day limit for detoxification services was abolished in 1995. Medical necessity determines the length of detoxification treatment.
- 2. There are specific limitations for Title XIX/XXI members ages 21 through age 64 in **mental hospitals**. For members age 21 through 64, reimbursement for inpatient services in a mental hospital (provider type 71) with more than 16 beds is limited to 30 days per admission and 60 days per contract year (July 1-June 30). An admission which spans contract years, is counted as one admission; only 30 days of the admission are reimbursable with Title XIX/Title XXI funds. After 30 days of an admission or after the 60th cumulative day in a contract year, Title XIX reimbursement is not available for services provided to a member whether the service is in or outside of the IMD, until the member is discharged from the IMD.
- 3. For Title XIX and XXI members age 20 and younger and age 65 and older, there are no length-of-stay limitations. An individual may not apply for Title XXI (KidsCare) eligibility nor be redetermined for such eligibility while residing in an IMD. A Title XXI member whose annual eligibility redetermination date occurs while the individual is residing in an IMD will be disenrolled from Title XXI and evaluated for Medicaid, Title XIX eligibility.
- 4. For Title XIX members age 20 and younger who are residing in an IMD (mental hospital), the only Title XIX service which may be reimbursed is the inpatient benefit; Title XIX reimbursement is not available for any other service provided to a member whether the service is in or outside of the IMD, until the member is discharged from the IMD.
- 5. Prior authorization, with a completed certification of need, must be obtained for planned inpatient hospital services prior to admission.
- 6. Providers must comply with requirements for utilization control and patient rights in inpatient hospitals. (Exhibit J)
- 7. Mental Hospitals (provider type 71) must provide written notification upon admission to a Title XIX member or the member's parents or legal guardian:
 - That AHCCCS eligibility for members who are age 21 through 64 may end if they remain in an IMD longer than 30 days per admission or 60 days per contract year (July 1 June 30);
 - That for members age 0-20, Title XIX reimbursement is not available for any service other than the inpatient benefit (e.g. medical services provided by other than the IMD).
- 8. Mental Hospitals (provider type 71) are required to notify AHCCCS Member Services (fax: 602-253-4807 or telephone: 602-417-4412) when a Title XIX or TXXI member age 21 through 64 years old has been a resident/inpatient for 30 consecutive days and provide the following information:
 - Provider Identification Number and telephone number
 - Recipient's name, date of birth, AHCCCS Identification Number and Social Security Number
 - Date of Admission

Provider Qualifications:

■ Hospitals may provide services to persons if the hospital is accredited through the Joint Commission if providing treatment to clients under the age of 21 and meets the requirements of 42 CFR 440.10 and Part 482 and is licensed pursuant to A.R.S. 36, Chapter 4, Articles 1 and 2;

OR

• For adults age 21 or older, is certified as a provider under Title XVIII of the Social Security Act;

OR

- For adults age 21 or older, is currently determined by ADHS Assurance and Licensure to meet such requirements.
- In addition, hospitals providing emergency inpatient services beyond 72 hours must have OBHL licensure.

- Freestanding psychiatric facilities must meet the specific requirements of A.A.C. R9-20 (i.e., provision of psychiatric acute care).
- Additionally, if seclusion and restraint is provided, then the facilities must meet the requirements set forth in A.A.C. R9-20.

Service Codes:

Revenue Codes 114, 116, 124, 126, 134, 136, 154, 156